

1102268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

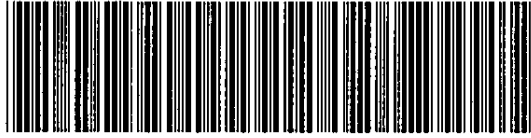
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RA change  
[Signature]

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Gardens at Kendale Lakes C.A. Inc. ■  
(Name of Corporation)

**DOCUMENT NUMBER:** N02268

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Adda Alvarez  
(Name of Contact Person)

(Firm/Company)

5213 SW 139 Court  
(Address)

Miami, Florida 33175  
(City/State and Zip Code)

For further information concerning this matter, please call:

Adda Alvarez at ( 305 ) 225-1229  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Gardens at Kendale Lakes Condominium Association, Inc.

2. The principal office address: 8020 SW 152 Avenue, Unit 312, Miami Florida 33193

3. The mailing address (if different): P.O. Box 83-1328 Miami, Florida 33283

4. Date of incorporation/qualification: 03/28/1984 Document number: N02268

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SKRLD, Inc.  
201 Alhambra Circle Suite 1102  
Coral Gables Florida 33134

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

c/o: Mercedes Mesa  
8020 SW 152 Avenue, # 312  
(P.O. Box NOT acceptable)  
Miami, Florida 33193

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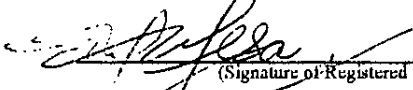
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

ADDA ALVAREZ - Secretary  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

4-23-09  
(Date)

If signing on behalf of an entity:

Mercedes Mesa  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314